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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 09/665,646 09/19/2000 PAT 6,351,684 *FSR*

** FOREIGN APPLICATIONS *****

None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/26/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 4	TOTAL CLAIMS 15 11	INDEPENDENT CLAIMS 1 1
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met				
Verified and Acknowledged <i>[Signature]</i>	Allowance Examiner's Signature <i>[Signature]</i>	Initials <i>[Initials]</i>		

ADDRESS

40581

TITLE

Mask identification database server

FILING FEE RECEIVED 740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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